

Work Order ID 112386

January-30-14 11:39:27 AM

112386

Page 1

Item ID: D3606-1

Accept

N900040100

Setup Start

NS1

Revision ID:

Item Name: Cuff

Stop

NS2

Start Date: 1/30/14 Start Qty: 8.00

8

Cust Item ID:

Required Date: 1/30/14 Req'd Qty: 8.00

8

Customer:

Reference:

Approvals: Process Plan: W

Date: _____

Tooling: _____ Date: _____

Run Start

NR1

QC: _____ Date: _____

SPC (Y/N): _____ Date: _____

Stop

NR2

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
--------------------------------	--------------------------	----------------------	---------	--------	--------------	---------------	---------------	------------------	----------------

Draw Nbr	Revision Nbr
D3606	Rev B

100

100

Bandsaw

BAND SAW

0.00

DAS

40

9-69

Jeaspa Bandsaw

Memo

0.00

Cut blank 7.300" long

8 Ø

14/03/23

110

110

Doosan

DOOSAN LATHE

0.00

DAS

25

9-69

Doosan Lathe

Memo

0.00

1-Turn as per folio FA 683 & DWG D3606, FOLIO REV: A DWG
REV: B 2-Deburr as required8

14/3/29

120

120

QC

QC2- Inspect parts off machine FAI/FAIB

0.00

Quality Control

Memo

0.00

8

14/3/29

9-69

DQA: _____ Date: _____

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: Date: _____

Work Order update only

Work Order: _____	DISPOSITION			AGAINST DEPARTMENT/PROCESS					
Part No. _____	Rework <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>				
NCR No. _____	Scrap <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>				
	Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>				
	Suspected Unapproved <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>					

Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

FAULT CATEGORY

Landing Gear	General			
Bending	Bend	Folio/Program	Outside Dimensions	Pressure/Forced
Centre Not Concentric	BOM/Route	Grain	Over/Under tolerance	Set-up
Cracks	Broken/Damage/Defect	Hardware	Part Incorrect	Temperature/Cure
Crimp/Kink/Ripple/Wave	Burrs	Inspection Incomplete/Unqualified	Part Lost/Missing	Weld
Cuffs	Contamination	Instructions Incomplete/Unclear	Part Moved	Wrong Stock Pulled
Crushing	Countersink	Misaligned/off center	Positioned Wrong	
Heat Treat	Cut Too Short	Mislabeled	Power Loss/Surge	Other
Inspection Strip in Tube	Drawing	Misread		
Marks/Chatter	Drill Holes	Off-set		
Turning Sequence	Finish	Out of Calibration		
Wave/Twist in Tube	Fit/Function	Out of Sequence		

Work Order ID 112386

January-30-14 11:39:27 AM

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Page 2

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Start Date: 1/30/14 Start Qty: 8.00

8

Cust Item ID:

Required Date: 1/30/14 Req'd Qty: 8.00

8

Customer:

Reference:

Approvals:

Process Plan:

Date:

Tooling:

Date:

Run Start

NR1

QC:

Date:

SPC (Y/N):

Date:

Stop

NR2

Sequence ID/
Work Center ID

Operation
Description

130

QC8- Inspect parts - second check

130

QC

Quality Control

Set Up/
Run Hours

Tool ID

Tool #

Plan
Code

Accept
Qty

Reject
Qty

Reject
Number

Insp.
Stamp

DAS

14

9-89

02/14/03/31

8

8

140

Chemical Conversion Coat per QSI005 4.1

0.00

140

HandFinish

Hand Finishing

Memo

0.00

8

8

150

QC7- Inspect part completeness to step on W/O

0.00

150

QC

Quality Control

DAS
27
9-89

0.00

14/03/31

8

DQA: _____ Date: _____



WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: Date: _____

Work Order update only

Work Order: _____	DISPOSITION	AGAINST DEPARTMENT/PROCESS					
Part No. _____	Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>	Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/>	Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/>	Water Jet <input type="checkbox"/> Prod. Eng. Coor. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/>	Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/>		
NCR No. _____							

Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

FAULT CATEGORY

Landing Gear	General			
Bending	Bend			Outside Dimensions
Centre Not Concentric	BOM/Route			Over/Under tolerance
Cracks	Broken/Damage/Defect			Part Incorrect
Crimp/Kink/Ripple/Wave	Burrs			Part Lost/Missing
Cuffs	Contamination			Part Moved
Crushing	Countersink			Positioned Wrong
Heat Treat	Cut Too Short			Power Loss/Surge
Inspection Strip in Tube	Drawing			Pressure/Forced
Marks/Chatter	Drill Holes			Set-up
Turning Sequence	Finish			Temperature/Cure
Wave/Twist in Tube	Fit/Function			Weld
				Wrong Stock Pulled
				Other

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112386

Page 3

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8

Cust Item ID:

Required Date: 1/30/14 Req'd Qty: 8.00

8

Customer:

Reference:

Approvals:

Process Plan:

Date:

Tooling:

Date:

Run Start

NR1

QC:

Date:

SPC (Y/N):

Date:

Stop

NR2

Sequence ID/
Work Center ID

Operation
Description

160

Identify as per dwg & Stock Location: ST482

Set Up/
Run Hours

Tool ID

Tool #

Plan
Code

Accept
Qty

Reject
Qty

Reject
Number

Insp.
Stamp

160

Packaging

Packaging

Memo

0.00

8X

DAS
28
9-89

14-03-31

170

QC21- Final Inspection - Work Order Release

0.00

170

QC

Quality Control

Memo

0.00

MLJ 14-04-01

14-04-01

DQA: _____ Date: _____



WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order update only

Work Order: _____	DISPOSITION	AGAINST DEPARTMENT/PROCESS					
Part No. _____	Rework Scrap Use-as-is Suspected Unapproved	Skid-tube Machining Thermoforming Large Fab	Crosstube Small Fab Finishing Composite	Water Jet Prod. Eng. Coor. Rec/Store/Packaging Supplier	Engineering Quality Other		
NCR No. _____							

Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

FAULT CATEGORY									
Landing Gear	General								
Bending	Bend	Folio/Program	Outside Dimensions	Pressure/Forced					
Centre Not Concentric	BOM/Route	Grain	Over/Under tolerance	Set-up					
Cracks	Broken/Damage/Defect	Hardware	Part Incorrect	Temperature/Cure					
Crimp/Kink/Ripple/Wave	Burrs	Inspection Incomplete/Unqualified	Part Lost/Missing	Weld					
Cuffs	Contamination	Instructions Incomplete/Unclear	Part Moved	Wrong Stock Pulled					
Crushing	Countersink	Misaligned/off center	Positioned Wrong	Other					
Heat Treat	Cut Too Short	Mislabeled	Power Loss/Surge						
Inspection Strip in Tube	Drawing	Misread							
Marks/Chatter	Drill Holes	Off-set							
Turning Sequence	Finish	Out of Calibration							
Wave/Twist in Tube	Fit/Function	Out of Sequence							

Picklist Print

January-30-14 3:25:23 PM

Page 1

Work Order ID: 112386

Parent Item: D3606-1

Parent Item Name: Cuff

Start Date: 1/30/14

Required Date: 1/30/14

Start Qty: 8.00

Required Qty: 8.00

Comments: IPP rev A new issue EC

IPP Rev:B 08-04-07 chg to revB DD verified by:

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
D6009-129		Manufactured	No				Each	26.0000		0.01		14/03/77	DAS
Crosstube Material													40
							<u>Location</u>	<u>Loc Qty</u>	<u>Loc Code</u>				9-89
							LG	19					
							75648	19					
							LG003	7					
							75627	7					

D6008-180
69800

69800 Feet.

DQA: _____ Date: _____

Date: _____

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Date:

Work Order update only



Work Order: _____			DISPOSITION			AGAINST DEPARTMENT/PROCESS					
			Rework <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>				
Part No. _____			Scrap <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>				
NCR No. _____			Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>				
			Suspected Unapproved <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>					
Root Cause		Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector	
Design <input type="checkbox"/>	Doc/Data <input type="checkbox"/>										
Equip/Tooling <input type="checkbox"/>											
Handling/Pre <input type="checkbox"/>											
Material <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Offset/Setup <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Transport <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											
FAULT CATEGORY											
Landing Gear			General								
Bending <input type="checkbox"/>	Bend <input type="checkbox"/>		Folio/Program <input type="checkbox"/>			Outside Dimensions <input type="checkbox"/>			Pressure/Forced <input type="checkbox"/>		
Centre Not Concentric <input type="checkbox"/>	BOM/Route <input type="checkbox"/>		Grain <input type="checkbox"/>			Over/Under tolerance <input type="checkbox"/>			Set-up <input type="checkbox"/>		
Cracks <input type="checkbox"/>	Broken/Damage/Defect <input type="checkbox"/>		Hardware <input type="checkbox"/>			Part Incorrect <input type="checkbox"/>			Temperature/Cure <input type="checkbox"/>		
Crimp/Kink/Ripple/Wave <input type="checkbox"/>	Burrs <input type="checkbox"/>		Inspection Incomplete/Unqualified <input type="checkbox"/>			Part Lost/Missing <input type="checkbox"/>			Weld <input type="checkbox"/>		
Cuffs <input type="checkbox"/>	Contamination <input type="checkbox"/>		Instructions Incomplete/Unclear <input type="checkbox"/>			Part Moved <input type="checkbox"/>			Wrong Stock Pulled <input type="checkbox"/>		
Crushing <input type="checkbox"/>	Countersink <input type="checkbox"/>		Misaligned/off center <input type="checkbox"/>			Positioned Wrong <input type="checkbox"/>					
Heat Treat <input type="checkbox"/>	Cut Too Short <input type="checkbox"/>		Mislabeled <input type="checkbox"/>			Power Loss/Surge <input type="checkbox"/>					
Inspection Strip in Tube <input type="checkbox"/>	Drawing <input type="checkbox"/>		Misread <input type="checkbox"/>			Other <input type="checkbox"/>					
Marks/Chatter <input type="checkbox"/>	Drill Holes <input type="checkbox"/>		Off-set <input type="checkbox"/>								
Turning Sequence <input type="checkbox"/>	Finish <input type="checkbox"/>		Out of Calibration <input type="checkbox"/>								
Wave/Twist in Tube <input type="checkbox"/>	Fit/Function <input type="checkbox"/>		Out of Sequence <input type="checkbox"/>								

DART AEROSPACE LTD	Work Order:	<u>112386</u>
Description: Cuff	Part Number:	<u>D3606-1</u>
Inspection Dwg: D3606 Rev: B		Page 1 of 1

FIRST ARTICLE INSPECTION CHECKLIST

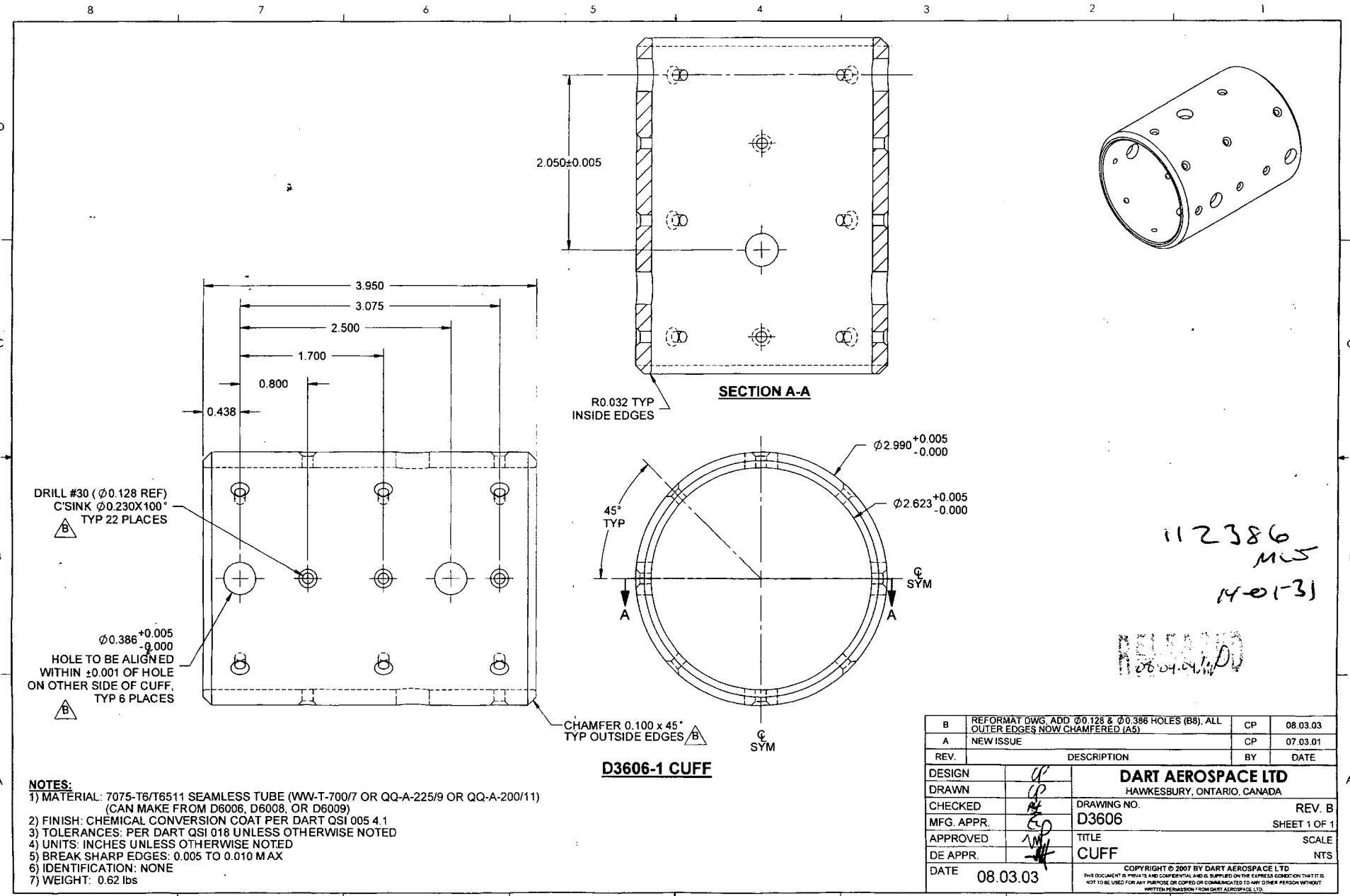
DAS

Measured by:	<u>JL</u>
Date:	14-3-29

Audited by:	14 9-89
Date:	14/03/31

Preliminary Approval:	
Date:	

Rev	Date	Change	Revised by	Approved
A	12.02.01	New Issue	KJ	MM



B	REFORMAT DWG. ADD Ø 0.128 & Ø 0.386 HOLES (B8), ALL OUTER EDGES NOW CHAMFERED (A5)			CP	08.03.03
A	NEW ISSUE			CP	07.03.01
REV.	DESCRIPTION			BY	DATE
DESIGN	<i>CP</i>	DART AEROSPACE LTD			
DRAWN	<i>CP</i>	HAWKESBURY, ONTARIO, CANADA			
CHECKED	<i>AT</i>	DRAWING NO.	REV. B		
MFG. APPR.	<i>SD</i>	D3606	SHEET 1 OF 1		
APPROVED	<i>TM</i>	TITLE	SCALE		
DE APPR.	<i>TH</i>	CUFF	NTS		
DATE	08.03.03	COPYRIGHT © 2007 BY DART AEROSPACE LTD. THIS DOCUMENT IS THE PROPERTY OF DART AEROSPACE LTD. IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT			